

Issue Classification 			Application No.	Applicant(s)	
			10/694,542 Examiner Joseph D. Anthony	GREEN, FREDERICK H. Art Unit 1714	<i>Page 1 of 2</i>

ORIGINAL			CROSS REFERENCE(S)					
CLASS	SUBCLASS	CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)					
210	749	210	769					
INTERNATIONAL CLASSIFICATION			75	743	744			
C 0 2 F	1/68	423	109	105.1				
C 2 2 B	7/02	588	236					
C 2 2 B	7/04	252	184					
C 2 2 B	17/00							
C 2 2 B	19/00							
<i>Joseph D. Anthony</i>			Total Claims Allowed: 11					
(Assistant Examiner)		(Date)	Joseph D. Anthony		O.G.		O.G.	
<i>J. Middleton</i> 8/18/04		(Legal Instruments Examiner)	Art Unit 1714	08/17/04	Print Claim(s)	Print Fig.	1	
(Primary Examiner)			(Date)					

<input checked="" type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original
1	1	31	61	91	121	151	181
2	2	32	62	92	122	152	182
3	3	33	63	93	123	153	183
4	4	34	64	94	124	154	184
5	5	35	65	95	125	155	185
6	6	36	66	96	126	156	186
7	7	37	67	97	127	157	187
8	8	38	68	98	128	158	188
9	9	39	69	99	129	159	189
10	10	40	70	100	130	160	190
11	11	41	71	101	131	161	191
	12	42	72	102	132	162	192
	13	43	73	103	133	163	193
	14	44	74	104	134	164	194
	15	45	75	105	135	165	195
	16	46	76	106	136	166	196
	17	47	77	107	137	167	197
	18	48	78	108	138	168	198
	19	49	79	109	139	169	199
	20	50	80	110	140	170	200
	21	51	81	111	141	171	201
	22	52	82	112	142	172	202
	23	53	83	113	143	173	203
	24	54	84	114	144	174	204
	25	55	85	115	145	175	205
	26	56	86	116	146	176	206
	27	57	87	117	147	177	207
	28	58	88	118	148	178	208
	29	59	89	119	149	179	209
	30	60	90	120	150	180	210

Issue Classification				Application No.		Applicant(s)	
				10/694,542		GREEN, FREDERICK H.	
				Examiner		Art Unit	
				Joseph D. Anthony		1714	Page 2 OF 2

ORIGINAL				CROSS REFERENCE(S)									
CLASS		SUBCLASS		CLASS		SUBCLASS (ONE SUBCLASS PER BLOCK)							
INTERNATIONAL CLASSIFICATION													
C	2	2	B	34/00									
B	0	1	D	11/02									
				/									
				/									
				/									
(Assistant Examiner) (Date)												Total Claims Allowed:	
(Legal Instruments Examiner) (Date)				(Primary Examiner)				(Date)				O.G. Print Claim(s)	O.G. Print Fig.

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original
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214		244		274		304	
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216		246		276		306	
217		247		277		307	
218		248		278		308	
219		249		279		309	
220		250		280		310	
221		251		281		311	
222		252		282		312	
223		253		283		313	
224		254		284		314	
225		255		285		315	
226		256		286		316	
227		257		287		317	
228		258		288		318	
229		259		289		319	
230		260		290		320	
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236		266		296		326	
237		267		297		327	
238		268		298		328	
239		269		299		329	
240		270		300		330	